

Pilot Grants

Investigating Disparities in Prenatal Care Access and Outcomes during COVID-19 Among Immigrant Mothers in Pennsylvania

[Family & Community Health](#)

Statement of Problem

Immigrants, and especially undocumented immigrants, are less likely to access prenatal care due to a variety of factors, such as language barriers, discrimination and lack of knowledge of existing resources. This has been exacerbated in recent years by highly publicized punitive immigration policies, like the public charge rule of 2019, and the COVID-19 pandemic. However, most existing research only highlights the risk factors that could lead to diminished health care access and outcomes, rather than elucidating the lived experiences of immigrant families during these difficult times.

Description

This project sought to assess and understand the impact of the pandemic on immigrant mothers' access to prenatal health care using a mixed-methods approach. We chose to focus on access to prenatal care for two reasons: 1) pregnancy has significant health implications and risks for people who give birth that can be addressed during routine prenatal visits, and 2) health care access and outcomes during pregnancy are intimately related to infant health. Thus, understanding access to quality prenatal care for immigrant populations has important intergenerational public health implications. We aimed to highlight multi-level challenges and facilitators that immigrant mothers face to accessing prenatal care to inform efforts that can address disparities they encounter.

For the quantitative part of this project, we conducted analyses of all live births in Pennsylvania between 2017-2021. We examined the difference in access to prenatal care by a mother's country of birth (U.S., or non-U.S. countries) within a "pre-pandemic" group (mothers who gave birth between January 2017—February 2020) and a "during-pandemic" group (mothers who gave birth between March 2020—October 2021), separately. We measured the adequacy of prenatal care by two metrics: initiation of care and number of visits. The data showed that foreign-born mothers were less likely to receive adequate prenatal care than U.S.-born mothers, and this disparity in prenatal care access and quality persisted during the pandemic.

Between June and November 2021, our team also conducted 10 semi-structured interviews in English and Spanish with direct service providers at five community-based organizations serving pregnant immigrant people in the Philadelphia region. What we learned from these interviews was that immigrant mothers experienced diminished access to and quality of prenatal care during the pandemic because of heightened fears of deportation from widely publicized federal policy changes, increased financial stress due to the pandemic, decreased ability to make appointments using previously employed strategies and challenges with prenatal care delivered solely through telemedicine. Interviewees provided suggestions for improving service access for

immigrant pregnant people during and after a pandemic, including

- quality improvement around adherence to institutional interpretation policies,
- implementation of culturally responsive group prenatal care,
- increased access to support people throughout the prenatal period and
- direct financial supports during pregnancy.

Next Steps

The results of our qualitative interviews are outlined in a recent paper titled, "[Exploring Prenatal Care Quality and Access During the COVID-19 Pandemic Among Pregnant Immigrants in Philadelphia Through the Lens of Community-Based Organizations](#)," published in Women's Health Report. As the team disseminates these findings, we will also continue the quantitative analyses.

By having a better understanding of disparities in prenatal care access within the context of the COVID-19 pandemic, we hope to inform efforts that seek to improve the health and well-being of immigrant families.

This pilot grant project was completed in July 2023.

Suggested Citation

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